

Power Training Services Application Form

HV Live Line Glove

Course Application and Prerequisites

1. Course/s being applied for:

You are required to provide Power Training Services (PTS) your evidence of prerequisites **before** your application can be reviewed and your enrolment confirmed.

A list of the required prerequisites can be found in the course descriptor on the PTS website.

Please return this form, with your evidence attached, to PTS as soon as possible:

- by email to support.services@pts-training.com.au or
- by hand or post to 90 Training Place, Jandakot, WA 6164

If you have any questions about your prerequisite evidence, contact PTS on (08) 9411 7888. Your formal leader/manager must complete the declaration section at the end of this form.

Maintain energised HV distribution	on overhead elec	trical appar	atus (Glove) Refresher	
Maintain energised HV distribution	on overhead elec	trical appar	atus (Glove) Familiarisatio	n
2. Student Details				
Unique Student Identifier (USI) If you do not have a USI, you can apply for one at www.usi.gov.au Note: You do not need to supply your USI if you	have previously pro	vided it to PTS	5.	
Western Power Network Authority Number (NAC)				
Surname name				_
Given names				
Date of birth				
Contact details	Work phone			
	Mobile phone			
	Email address			
Postal address (for issue of certificate)				_
	State		Postcode	

Employer Details	Company name
	Contact name
	Contact phone number
Fitness for work	Yes No
Are you medically fit to complete the required training?	If you have answered NO please provide details.
LLN Assistance Do you require assistance with Language, Literacy or Numeracy?	Yes No
3. Prerequisite Evidence From the lists below TICK to indicate the pr	erequisite evidence you'll be submitting and how you will be

Note:

providing it.

- If your training was completed at PTS, no documentation is required. Just tick 'PTS training record' so this can be verified by PTS.
- If marked with a (*) you can provide evidence of the superseded and equivalent units.

	Document	PTS Training Record
Statement of Attainment for:		
UETTDRDP14A* Maintain energised HV distribution overhead electrical apparatus (Glove)		
UETTDRRF08B* Perform EWP controlled descent escape		
TLILIC2005* Licence to operate a boom-type elevating work platform (boom length 11 metres or more)		
XMED Authorisation (Live Line Medical)		

Student Consent

I consent to my personal information (including my PTS training records) being disclosed by PTS to directors, officers and employees and agents of Western Power and/or third parties under or in connection with one or more of the following circumstances:

- for the purposes of Western Power performing an incident investigation involving me
- to provide information to Western Power Network Authorisations to enable authorisation to work on the Western Power network
- to provide information to other RTO's or training providers for the purpose of proving that prerequisites have been met prior to attending a course with another RTO or training provider
- to provide non-identifiable statistical data to government entities.

I also consent to my employer (where they are not Western Power) and where they are paying for my training to be given access to my training information.

Date	
Signature	

Declaration by formal leader/manager

I confirm that the student named in this application has met the selection criteria requirements for live work training as per section 3.1 of the Western Power High Voltage Live Work manual.

I understand and am satisfied with the requirements for application and support their enrolment in the training program.

Name	
Company/Position	
Date	
Signature	

Application Approval (PTS to complete)	
I confirm that the student named in this applica training.	tion has met all requirements for enrolment into live work
Name	
Position	
Date	
Signature	